PTO/SB/01 (08-03)

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DECLARATION	FOR UTILI	TY OR	F									
	SIGN		First Named Inventor Michael M. Schechterv									
PATENT AF	PLICATIO	N	COMPLETE IF KNOWN									
(37 CF	R 1.63)	-	Application Number									
Declaration	Declarat	ion	Filing Date		·							
Submitted OR With Initial	Filing (s	urcharge	Art Unit									
Filing	(37 CFF required	R 1.16 (e))	Examiner Name	· ·								
I hereby declare that:												
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.												
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
Operating a Vehicle with Braking Energy Recovery												
(Title of the Invention)												
the specification of which												
is attached hereto												
OR			7									
was filed on (MM/DD/Y	YYY)		as United State	s Application N	lumber or PCT International							
Application Number		and was amended	on (MM/DD/YYYY	n [(if applicable).							
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as												
amended by any amendment												
I acknowledge the duty to di												
continuation-in-part application and the national or PCT intern					date of the prior application							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one												
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign												
application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.												
Prior Foreign Application	T WITHOUT PHOTES	Foreign Filing	Date I	Priority	Certified Copy Attached?							
Number(s)	Country	(MM/DD/YY		t Claimed	Yes No							
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New y												
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												

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[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Michael Moses					Family Name or Surname Schechter						
Inventor's Signature Michael M. Solch				フ	N			Date April 8, 2004			
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NAME OF SECOND INVENTO	R:				A pe	etition I	has bee	en filed f	for this unsigned inventor		
Given Name					Family Name						
(first and middle [if any])					or Surname						
Inventor's Signature									Date		
Residence: City	State			Country		Citizenship					
Mailing Address				·				•			
City	State				ZIP Coul			Count	ary		
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.											